SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)  B. Bate of Delivery  C. Signature
1 Article Art; record to:	1 10/16/1
* RM-11175	If YES enter deli
Alan Serena	No LE No
Vice President	1
Renda Broadcasting Corp. of Nevada	
900 Parish Street	3. Service Type
4th Floor	Certified Mail  Express Mail
Pittsburgh, PA 15220	Return Receipt for Merchandise
	C.O.D.
2. Article Number (Copy from service label)  4. Restricted Delivery? (Extra Fee)  Yes	
PS Form 3811, July 1999	
Domestic Heturn Receipt 102595-00-M-0952	
DOCKET NO MM-1/1/75  ORDER DATED 3/4/05	
Carcons CERTIFIED FCC 15-58/ MIMEOGRAPH NO.	
Vice President  Renda Broadcasting Corp. of  Nevada	R 0 9 REQUESTED
900 Parish Street	***************************************

4th Floor

Pittsburgh, PA 15220